Program Registration Form

- General rule: this form must be submitted AT LEAST THREE WEEKS PRIOR to the proposed date of your event. Some exceptions may be considered based on the nature of the event.
- Any program requiring a contract, check requests, complex logistical details should be made as far in advance as possible.
- Program registrations will NOT be accepted after December 1 for the fall semester.
- Program registrations will NOT be accepted after April 1 for the spring semester.

**DATE SUBMITTED:** __________________________________________

**STUDENT ORGANIZATION:** ____________________________________________

**PROGRAM CONTACT PERSON** (who your advisor will follow up with regarding this event): ____________________________

**PROGRAM CONTACT E-MAIL:** ____________________________________________

**PROPOSED PROGRAM TIME:** ____________________________________________

**DESCRIPTION OF PROGRAM, AND HOW IT SUPPORTS YOUR GROUP’S MISSION:**

**WHAT TYPE OF PROGRAM IS THIS?**

- [ ] Social
- [ ] Cultural
- [ ] Educational
- [ ] Promotional/Awareness
- [ ] Religious/Spiritual
- [ ] Community Service
- [ ] General Interest Meeting
- [ ] Recurring Meeting *(weekly/bi-weekly/monthly etc.)*
- [ ] Other: ____________________________

**PROPOSED PROGRAM DATE:** ____________________________________________

**PROPOSED PROGRAM TIME:** ____________________________________________

**PROGRAM LOCATION:**  
- [ ] On Campus *(list 3 room/space preferences):*
  1) ____________________________
  2) ____________________________
  3) ____________________________

- [ ] Off Campus *(address):* ______________________________________________

**EXPECTED ATTENDANCE:** ____________________________

*(Complete Back of Form)*
WILL YOU NEED AV/TECH SUPPORT (use of sound system, mics, computer, projection etc.)  __ YES  __ NO

WILL YOU NEED ESM FACILITIES SUPPORT (Room/space set up in specific way, extra garbage)  __ YES  __ NO

WILL FOOD BE SERVED AT THIS PROGRAM?  __ YES  __ NO

WILL THIS PROGRAM BE TICKETED?  __ YES (with fee)  __ YES (no fee – but to control capacity)  __ NO TICKETS

HOW WILL YOU PUBLICIZE THIS PROGRAM:
__ Facebook Event  __ Upbeat  __ Banner in SLC  __ Posters/Flyers  __ Student Life Website
__ Tabling in Lowry Hall  __ Tabling in SLC  __ Chalk Sidewalk in front of SLC  __ Other: ____________

ANTICIPATED BUDGET:
(Breakdown of all anticipated expense – speaker fees, food, printing, transportation etc. & anticipated income – if ticketed):

WHAT ADDITIONAL RESOURCES AND SUPPLIES MIGHT YOU REQUIRE FOR THIS PROGRAM?
(Decorations, volunteers, cash box, pens, markers, tape, scissors, tablecloth, etc.)

PLEASE LIST 3 DAYS AND TIMES YOU ARE GENERALLY AVAILABLE TO MEET TO DISCUSS THIS PROPOSED PROGRAM: (Monday-Friday, 9am-4pm; EXAMPLE.: Mondays between 10am-11:45am, Thursdays 1-2pm, Fridays 9-10am)

Thank you for your Program Registration submission. Please allow up to three business days for your advisor to review and contact for follow up.

OFFICE USE ONLY:
RECEIVED ON (DATE): ____________________________ BY (NAME): ____________________________